Case Management Program (CMP) Medi-Cal Waiver Program (MCWP) ARIES Required Minimum Data Set

Field Name	Tab Location	Sub-tab Location
First Name	Client Search / Demographics	Demographic Detail
Middle Initial	Client Search/ Demographics	Demographic Detail
Last Name	Client Search/ Demographics	Demographic Detail
Mother's Maiden Name	Client Search/ Demographics	Demographic Detail
Date of Birth	Client Search/ Demographics	Demographic Detail
Gender	Client Search/ Demographics	Demographic Detail
Zip Code	Demographics	Contact Info
County	Demographics	Contact Info
Hispanic	Demographics	Demographic Detail
Hispanic National Origin / Ethnicity	Demographics	Demographic Detail
Race 1	Demographics	Demographic Detail
National Origin / Ethnicity 1	Demographics	Demographic Detail
Place of Death	Demographics	Demographic Detail
Date of Death	Demographics	Demographic Detail
Current Living Situation Since	Demographics	Living Situation
Current Living Situation (Choose One)	Demographics	Living Situation
Agrees to Share Data	Demographics	Agency Specifics
Agency Status	Demographics	Agency Specifics
Status as of Date	Demographics	Agency Specifics
Agency Enrollment Date	Demographics	Agency Specifics
Household Income	Eligibility	Financial
Number of People in Household	Eligibility	Financial
Insurance Source	Eligibility	Insurance
Insurance Type	Eligibility	Insurance
Primary Insurance	Eligibility	Insurance
Program	Programs	CMP/MCWP
Status	Programs	CMP/MCWP
Status Date	Programs	CMP/MCWP
Client ID #	Programs	CMP/MCWP
Reason Disenrolled	Programs	CMP/MCWP
Date of Assessment	Programs	CMP/MCWP
Client Missed HAART Within Previous 48 Hours	Programs	CMP/MCWP
Assessment of Client's Ability to Take HAART	Programs	CMP/MCWP
Meds.	_	
Date of Symptomatic HIV+ Diagnosis	Programs	CMP/MCWP
Lowest CD4 Count at Time of Enrollment	Programs	CMP/MCWP
CD4 Date	Programs	CMP/MCWP
Highest Viral Load at Time of Enrollment	Programs	CMP/MCWP
Viral Load Date	Programs	CMP/MCWP
MCWP Level of Care	Programs	CMP/MCWP
Primary Medical Care	Medical	Basic Medical
Primary HIV Care	Medical	Basic Medical
CDC Disease Stage	Medical	Basic Medical

Field Name	Tab Location	Sub-tab Location
Date First HIV+	Medical	Basic Medical
AIDS Diagnosis Date	Medical	Basic Medical
AIDS Defining Conditions	Medical	Basic Medical
Diagnosis Date	Medical	Basic Medical
Karnofsky / Cognitive & Functional Ability Scale	Medical	Basic Medical
(CFA)		
Karnofsky / CFA Date	Medical	Basic Medical
Pediatric Scale	Medical	Basic Medical
Pediatric Scale Date	Medical	Basic Medical
CD4 Test Date	Medical	Medical History
T Cell Count	Medical	Medical History
Viral Load Date	Medical	Medical History
Viral Load Value	Medical	Medical History
STI/Hepatitis Type	Medical	Medical History
STI/Hepatitis Date	Medical	Medical History
STI/Hepatitis Diagnosis	Medical	Medical History
STI/Hepatitis Treatment Start Date	Medical	Medical History
TB Test Medically Indicated	Medical	Medical History
TB Test Medically Indicated Date	Medical	Medical History
Date PPD/TST Placed	Medical	Medical History
Date PPD/TST Read	Medical	Medical History
Chest X-Ray Date	Medical	Medical History
TB Diagnosis	Medical	Medical History
Date of TB Diagnosis	Medical	Medical History
Treatment Start Date	Medical	Medical History
Treatment End Date	Medical	Medical History
TB Treatment Type	Medical	Medical History
TB Treatment Status	Medical	Medical History
Immunization Type	Medical	Medical History
Immunization Date	Medical	Medical History
ER/Hospital Visits Date	Medical	Medical History
ER Visit	Medical	Medical History
ER/Hospital Reason	Medical	Medical History
Hospitalized	Medical	Medical History
If Hospitalized, # of Days	Medical	Medical History
Pap Smear & Pelvic Exam Date	Medical	OB/GYN & Pregnancy
Date First Reported Pregnant	Medical	OB/GYN & Pregnancy
Estimated Date of Conception	Medical	OB/GYN & Pregnancy
HIV Status During Pregnancy	Medical	OB/GYN & Pregnancy
Date Prenatal Care Began	Medical	OB/GYN & Pregnancy
ART Counseling Offered to Reduce HIV	Medical	OB/GYN & Pregnancy
Transmission to Infant		
Date Received ART Counseling	Medical	OB/GYN & Pregnancy
ART Offered to Reduce HIV Transmission to	Medical	OB/GYN & Pregnancy
Infant		
Date ART was Taken	Medical	OB/GYN & Pregnancy
Pregnancy Outcome	Medical	OB/GYN & Pregnancy
Date of Pregnancy Outcome	Medical	OB/GYN & Pregnancy

Field Name	Tab Location	Sub-tab Location
Newborn HIV Status	Medical	OB/GYN & Pregnancy
ART Type	Medications	ART
Start Date	Medications	ART
Anti-Retroviral Drugs	Medications	ART
Genotypic / Phenotypic Testing Performed to	Medications	ART
Determine Resistance to HIV Medications		
Genotypic / Phenotypic Date of Test	Medications	ART
Primary HIV Exposure	Risk & Assessments	Risk Factors
Substance Abuse History	Risk & Assessments	Substance Abuse
Substance Abuse History Dated	Risk & Assessments	Substance Abuse
Substance Abuse Treatment Status	Risk & Assessments	Substance Abuse
Mental Health History	Risk & Assessments	Mental Health
Mental Health History Dated	Risk & Assessments	Mental Health
Mental Health Treatment Status	Risk & Assessments	Mental Health
Services (Required of all Providers)		
Client Name / ID	Services	N/A
Staff	Services	N/A
Date of Service	Services	N/A
Contract ID	Services	N/A
Program	Services	N/A
Primary Service	Services	N/A
Secondary Service (if applicable)	Services	N/A
Unit of Service	Services	N/A

^{*} To view a complete list of CMP and MCWP primary and secondary service categories, go to the Office of AIDS provided Master ARIES data collection forms and see attachment #3 titled, "ARIES Case Management Program (CMP) and Medi-Cal Waiver Program (MCWP) Primary & Secondary Services."